Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	01-28-2008	Address:	<u>US 40 @ 25th St</u>	
Case #:	<u>32-28188</u>		Terre Haute, IN	
County:	<u>Vigo</u>		<u>47803</u>	
Type of Laboratory Seizure (check one) ☐ Operational Lab ☐ Chemical/Glassware/Equipment (only) ☐ Dumpsite (only)		Seizure Location (Residence Outbuilding Vehicle	check all that apply) Hotel/Motel Open – No Structure Other:	
Items Found: Location (bedroom, kitchen, open air, etc) (check all that apply) Lithium/Ammonia Reaction(s): Red Phosphorous/Iodine Reaction(s): Flammable Solvents: Water Reactive Metal (Lithium): Anhydrous Ammonia: Truck Hydrochloric Acid Gas Generator(s): Corrosive Acid: Corrosive Base: Other (item and location):				
Child under age 18 discovered (check one) Yes (number present) No *If yes, fax report to Child Protective Services This report is to be faxed to the following agence		Ephedrin Retail/Me Other:	Investigative Information Ephodrine/Pseudoephedrine Tracking Log Retail/Merchant Tip Other: that serve the location:	
	ment: Terre Haute FD	Fax: 812-2		
-	artment: Vigo County	Fax: 812-2		
	ction Service: <u>N/A</u>	Fax: <u>N/A</u>		
For further information regarding this methamphetamine laboratory, contact Investigating Officer: <u>Ritch A. Reynolds</u> Phone (812)299-1153				

- This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.
- This form is to be included with the case file, and a copy sent to the Claudestine Laboratory Team Leader for retention.